



accountabili-buddy

— CLARITY. COMMITMENT. FOLLOW THROUGH. —



TRAINING
MODULES

WORKBOOK 5A — COMPLEX FORMULATIONS & MULTI-FACTOR CASES

PURPOSE

Stages 1–4 taught the Accountabili-Buddy to:

- understand the accountability role;
- distinguish among common causes of non-follow-through;
- design and calibrate commitments;
- track evidence over time;
- recognize patterns;
- adjust accountability intensity;
- and manage the accountability process longitudinally.

Stage 5 begins where simpler accountability models stop being sufficient.

Many real cases do not contain one clean problem.

A client may simultaneously:

- have a commitment that is too large;
- avoid one specific component;
- experience genuine overload;
- hold excessively high standards;
- have conflicting priorities;
- and still choose not to follow through at times when none of those factors fully explains the result.

The Accountabili-Buddy must be able to work with several interacting mechanisms without turning the case into an elaborate theory of the client.

The purpose of complex formulation is not to identify every possible influence.

It is to determine:

Which factors are materially affecting follow-through now?

How are those factors interacting?

Which factor should the accountability process address first?

What evidence would tell us whether that intervention was correct?

LEARNING OBJECTIVES

By the end of this workbook, the trainee should be able to:

- recognize when a single-factor explanation is insufficient;
- identify primary, secondary, and background factors;
- distinguish interacting factors from unrelated observations;
- recognize sequential mechanisms;
- recognize one problem masking another;
- distinguish likely contributing factors from consequences;
- prioritize interventions when several problems are present;
- avoid attempting to solve every factor simultaneously;
- identify when reducing one problem reveals another;
- revise complex formulations as evidence changes;
- recognize contradictory evidence within multi-factor cases;
- preserve uncertainty without becoming indecisive;
- communicate complex reasoning simply to the client;
- avoid over-formulating;
- and maintain accountability focus even when the client's situation is complicated.

CORE CONCEPT REVIEW

COMPLEX DOES NOT MEAN MYSTERIOUS

A complex case contains more than one materially relevant factor.

It does not necessarily require deeper psychological interpretation.

Example:

Client commits to six workouts.

Actual schedule supports four.

Within the four available periods, the client repeatedly skips the one involving a group class because they feel embarrassed about being out of shape.

Two relevant factors exist:

Commitment overcalibration

and

selective avoidance.

The case is complex because both matter.

It is not complex because the Accountabili-Buddy needs to explain the client's personality.

MULTIPLE FACTORS CAN BE TRUE AT THE SAME TIME

The Accountabili-Buddy should avoid false either/or reasoning.

A client may be:

genuinely overwhelmed

and

avoiding one specific difficult task.

A commitment may be:

too large

and

poorly scheduled.

A goal may still matter

while

the client is discouraged.

Perfectionism may increase workload

which then produces genuine overwhelm.

NOT ALL FACTORS ARE EQUALLY IMPORTANT

A complex formulation should distinguish among:

PRIMARY FACTOR

The factor currently exerting the greatest influence on follow-through or the factor most useful to address first.

SECONDARY FACTOR

A meaningful additional influence.

BACKGROUND FACTOR

Relevant context that may affect the case but does not currently require intervention.

Example:

Client misses certification study.

Primary:

Work schedule leaves insufficient study periods.

Secondary:

Client avoids practice tests because poor scores feel discouraging.

Background:

Client prefers studying in the morning.

The preference matters less than the first two factors.

PRIMARY DOES NOT MEAN PERMANENT

The primary factor can change.

Week 1:

Overwhelm is primary.

After the number of active goals is reduced:

Most commitments improve.

One sales task remains untouched.

Now:

Avoidance may become primary.

The formulation should move with the evidence.

SOME FACTORS ARE SEQUENTIAL

One mechanism can create another.

Example:

Perfectionism each task takes three times longer backlog accumulates client becomes genuinely overwhelmed.

The overwhelm is real.

But simply reducing workload without addressing the perfectionistic work process may recreate the overload.

CAUSE AND CONSEQUENCE SHOULD NOT BE CONFUSED

Example:

Client repeatedly misses commitments.

Client becomes discouraged.

Discouragement may now affect future follow-through.

But discouragement may have begun as a consequence of repeated misses rather than their original cause.

Once present, it can become a secondary maintaining factor.

ONE PROBLEM CAN MASK ANOTHER

Example:

Client has eight active goals and completes almost none.

Initial formulation:

Overwhelm.

Intervention:

Reduce to three active goals.

Result:

Two now progress consistently.

The third still does not move.

The broad overwhelm previously obscured a more selective problem.

This is why intervention results are valuable evidence.

DO NOT TREAT COMPLEXITY AS PERMISSION TO LIST EVERYTHING

Weak complex formulation:

“This is overwhelm, perfectionism, avoidance, motivation, priorities, confidence, habits, mindset, time management, fear, and maybe burnout.”

This is not useful.

A professional formulation should simplify rather than expand confusion.

Better:

“The overall workload appears too high, and the repeated delay of client outreach remains selective even when workload is reduced. I would treat overload as the system-level issue and outreach avoidance as the specific secondary issue.”

INTERVENTION PRIORITY MATTERS

When multiple factors are present, ask:

Which intervention would create the most useful improvement or information first?

Sometimes the first intervention targets the primary factor.

Sometimes it targets a prerequisite.

Sometimes it targets the factor preventing evaluation of everything else.

THE CLIENT DOES NOT NEED THE FULL INTERNAL FORMULATION

The Accountabili-Buddy may internally reason:

"The data suggest capacity mismatch plus selective evaluation avoidance, with discouragement emerging secondarily."

The client may only need:

"Five applications doesn't fit the time you actually have, so let's revisit the number first. I also want to keep watching what happens with the higher-stakes applications, because those are being postponed even when the routine ones get done."

Complex reasoning should produce simple communication.

PART 1 — SINGLE OR MULTI-FACTOR?

Choose:

A. One primary factor currently sufficient B. Multiple factors materially relevant C. Insufficient information

Client commits to five workouts.

Only three time periods exist.

Client completes all three consistently.

Answer:

Client commits to five workouts.

Three periods exist.

Client completes two, repeatedly skipping the session with the trainer because they feel self-conscious.

Answer:

Client says:

"I am overwhelmed."

No behavioral information is available.

Answer:

Client has nine active goals.

After reducing to three, two improve immediately while sales outreach remains untouched.

Answer:

Client repeatedly revises completed work, causing tasks to take three times longer and creating a large backlog.

Answer:

Client misses one commitment after illness.

Answer:

PART 2 — PRIMARY, SECONDARY, OR BACKGROUND?

For each scenario identify:

Primary factor Secondary factor Background/context

Client has time for three study sessions.

Commits to six.

Also dislikes practice tests because poor scores are discouraging.

Client completes three reading sessions but no practice tests.

Primary:

Secondary:

Background:

Client has seven active goals and little available discretionary time.

Business outreach is repeatedly avoided even during relatively open weeks.

Primary:

Secondary:

Background:

Client's work takes twice as long because of repeated unnecessary revision.

The resulting backlog now causes genuine overload.

Primary:

Secondary:

Explain your ordering:

Client still wants a certification.

Repeated non-completion has reduced confidence.

Current study commitment also exceeds available time.

Primary:

Secondary:

What evidence would affect the ordering?

PART 3 — WHICH FACTOR SHOULD BE ADDRESSED FIRST?

Factors:

Commitment exceeds actual capacity.
Client also feels guilty about lowering it.

Which should be addressed first?

Why?

Factors:

Client does not know how to complete a required technical step.
Client also procrastinates starting the project.

When a prerequisite requires specialized expertise, the Accountabili-Buddy may address the client’s follow-through in obtaining that expertise but does not provide or evaluate the specialized guidance within the accountability role.

What comes first?

Why?

Factors:

Nine active goals create broad overload.

One goal also appears selectively avoided.

What intervention may come first?

Why?

Factors:

Proposal is objectively incomplete.

Client also has a history of perfectionism.

What comes first?

Why?

Factors:

Client no longer knows whether the goal matters.

Execution plan is also poor.

What should usually be reviewed first?

Why?

PART 4 — SEQUENTIAL MECHANISMS

Identify the likely sequence.

Client repeatedly expands completion standards.

Tasks take longer.

Backlog grows.

Client becomes overwhelmed.

Sequence:

Client chronically overcommits.
Repeated misses follow.
Client becomes discouraged and begins selecting trivially small commitments.

Sequence:

Client avoids sales activity.
Revenue remains low.
Financial pressure increases.
Client now takes unrelated short-term work, reducing business-building time further.

Sequence:

Client accepts too many active goals.
Sleep is reduced to keep up.
Fatigue increases.
Follow-through declines across all goals.

Sequence:

Why does sequence matter when choosing an intervention?

PART 5 — CONTRIBUTOR OR CONSEQUENCE?

Classify each as:
A. Likely contributing factor B. Likely consequence C. Can become both D. Insufficient information
Client misses repeatedly and becomes discouraged afterward.
Discouragement:

Answer:

Client's perfectionistic revision causes tasks to take three times longer.
Overload:
Answer:

Repeated missed deadlines damage confidence, which then increases hesitation on future tasks.

Low confidence:

Answer:

Client reports feeling stressed.

No timeline or behavioral context is known.

Stress:

Answer:

Why can consequences become maintaining factors?

PART 6 — MASKING

Client has eight active goals.

Almost nothing progresses.

After reducing to two goals, fitness progresses reliably but business outreach remains zero.

What did the original overload mask?

Client's commitment is reduced from six study sessions to three.

Client still completes only one, despite three available periods.

What original explanation has weakened?

What new issue becomes more important?

Client receives needed technical instruction.

The task is now understood.

Submission still does not happen.

What has changed?

Client resolves a major scheduling problem.

All commitments improve except one high-stakes presentation.

What does this suggest?

PART 7 — ONE INTERVENTION CAN FUNCTION AS A TEST

Hypothesis:

Broad overload is primary.

Intervention:

Reduce active goals from eight to three.

What result would support the hypothesis?

What result would weaken it?

Hypothesis:

Unrealistic commitment size is primary.

Intervention:

Reduce target from six to three based on actual capacity.

What result would support the hypothesis?

What result would suggest another mechanism remains?

Hypothesis:

Perfectionistic revision is depressing writing output.

Intervention:

Separate drafting from editing.

What result would support the hypothesis?

Why are interventions useful diagnostically in complex cases?

PART 8 — MIXED FORMULATION WITHOUT OVER-FORMULATION

For each case, write the simplest useful formulation.

Client has enough time for three applications.

Commits to five.

Submits two routine applications but repeatedly postpones the one high-stakes application.

Formulation:

Client has six active goals, frequently switches among them, and reports feeling overloaded.

When the workload is reduced, all goals improve except one public-speaking commitment.

Formulation:

Client repeatedly overchecks work, causing backlog and fatigue.

Formulation:

Client says certification still matters.

Available study time has decreased permanently.

Repeated low scores have also damaged confidence.

Formulation:

PART 9 — WHAT NOT TO INCLUDE

For each case, identify which information is likely irrelevant to the working formulation.

Client is overcommitted, misses study sessions, and also mentions preferring blue notebooks.

Irrelevant detail:

Client avoids submitting a completed proposal and mentions that their office chair is uncomfortable.

No evidence suggests the chair affects submission.

Irrelevant detail:

Client has broad overload due to caregiving and multiple active goals.

Client also says they dislike Tuesdays.

No Tuesday-specific pattern exists.

Irrelevant detail:

Why is excluding irrelevant information part of professional formulation?

PART 10 — DOMINANT FACTOR VS. CONTRIBUTING FACTOR

Client's five-session target exceeds actual capacity of three.

Client also occasionally forgets one session.

Which is dominant?

Which is contributing?

Client has adequate time.

Almost all tasks are completed.

Only investor outreach is repeatedly avoided.

Client also reports being generally busy.

Which factor appears dominant for investor outreach?

Client is genuinely overloaded across all goals.

One task also has a poorly worded commitment.

Which factor may be system-level dominant?

Which issue still needs repair?

PART 11 — FACTORS CAN CHANGE RANK

Week 1:

Eight active goals.

Broad non-completion.

Primary factor:

Intervention:

Reduce to three active goals.

Week 3:

Two goals now progress.

One still does not.

Primary factor for the remaining problem may now be:

Why is it a mistake to keep treating overwhelm as the primary issue simply because it was primary earlier?

PART 12 — CONTRADICTORY EVIDENCE IN COMPLEX CASES

Formulation:

Capacity problem + avoidance.

New evidence:

Client repeatedly completes five similar difficult tasks during the same available time.

Which part of the formulation weakens?

Formulation:

Overwhelm + perfectionism.

New evidence:

After workload is reduced, excessive revision continues unchanged.

Which factor becomes stronger?

Formulation:

Loss of interest + discouragement.

New evidence:

Client says they would enthusiastically continue if success were reasonably likely.

Which factor weakens?

Formulation:

Avoidance + missing skill.

New evidence:

Client receives training and immediately completes the previously avoided task.

What happens to the avoidance hypothesis?

PART 13 — MULTIPLE FACTORS DO NOT REQUIRE MULTIPLE INTERVENTIONS AT ONCE

Client is:

overwhelmed;

overcommitted;

poorly scheduled;

and discouraged.

Should the Accountabili-Buddy automatically introduce four interventions at once?

Why?

What is one risk of changing everything simultaneously?

What is usually preferable?

PART 14 — PRIORITIZE FOR INFORMATION

Sometimes the best first intervention is the one that clarifies the case.

Possible causes:

Capacity vs. avoidance.

What intervention could help distinguish them?

Possible causes:

Overwhelm vs. selective avoidance.

What intervention could help distinguish them?

Possible causes:

Perfectionism vs. legitimate quality requirement.

What information or intervention could distinguish them?

PART 15 — COMPLEX COMMITMENT NON-COMPLETION

Client commitment:

Submit four job applications.

Result:

Two.

Relevant facts:

client had time for three;

two routine applications submitted;

one high-stakes application postponed;

fourth application never realistically fit the schedule.

How many distinct issues are present?**What portion of the miss is explained by capacity?****What portion remains unexplained by capacity alone?****Write the working formulation:****What should the next commitment look like?**

PART 16 — SYSTEM-LEVEL AND TASK-LEVEL FACTORS

Client has ten active commitments and insufficient total capacity.

Within the reduced list, client still avoids one phone call.

System-level factor:**Task-level factor:****Why should these be separated?**

Can the correct intervention move in opposite directions?

Example:

Reduce total number of commitments while becoming more direct about one avoided commitment.

YES / NO

Explain:

PART 17 — MIXED FORMULATION AND CALIBRATION

Client's target is too high.

Client also uses that overly high target to justify giving up after one miss.

What two issues exist?

What should be recalibrated?

What behavior should still be challenged?

Why shouldn't reducing the target erase accountability for the remaining realistic commitment?

PART 18 — MIXED FORMULATION AND PERFECTIONISM

Client commits to writing 1,000 words.

Actual output:

Client spends excessive time editing.

Available writing time is also 25% lower than when target was established.

What factors are present?

Should the target probably be reviewed?

Should editing behavior also be addressed?

Why would choosing only one explanation be weak?

PART 19 — MIXED FORMULATION AND OVERWHELM

Client has eight goals.

Reports overwhelm.

Also repeatedly refuses to pause any goal because:

“I should be able to do all of them.”

What factors may interact?

What intervention should likely come first?

What belief or decision may still need challenge afterward?

PART 20 — MIXED FORMULATION AND GOAL VALUE

Client says goal still matters.

Behavior toward it remains minimal.

Current workload is excessive.

Client also expresses relief whenever goal work is canceled.

What should the Accountabili-Buddy avoid concluding immediately?

What should be investigated?

Why can overload and changing goal value coexist?

PART 21 — SAME BEHAVIOR, MULTIPLE FUNCTIONS

A client repeatedly researches instead of submitting.

Research may function as:

- legitimate preparation;
- perfectionistic checking;
- uncertainty reduction;
- avoidance of evaluation;
- or habit.

What evidence would support legitimate preparation?

What evidence would support perfectionistic checking?

What evidence would support evaluation avoidance?

Why should the Accountabili-Buddy avoid deciding based solely on the visible behavior?

PART 22 — CLIENT PROVIDES MULTIPLE EXPLANATIONS

Client says:

“I didn’t have time, I was overwhelmed, I wasn’t ready, and honestly I didn’t really feel like doing it.”

Should the Accountabili-Buddy treat all four explanations as equally established?

What should happen instead?

Write one useful follow-up question.

PART 23 — COMPOUND EXPLANATIONS CAN BE TRUE

Client says:

"I genuinely had less time, and I also avoided using the time I did have for the difficult part."

Is this logically possible?

What should the Accountabili-Buddy do?

Client says:

"The project is too big, but I also keep making it bigger."

What factors might this describe?

PART 24 — CLIENT WANTS ONE SIMPLE LABEL

Client:

"So which is it? Am I overwhelmed or avoiding?"

Evidence supports both broad overload and selective avoidance.

Write the response:

Why can forcing one label distort a complex case?

PART 25 — CLIENT WANTS EVERY FACTOR EXPLAINED

Client:

"Tell me every reason you think I'm doing this."

What should the Accountabili-Buddy avoid?

What is the more useful focus?

Write the response:

PART 26 — COMPLEXITY WITHOUT PSYCHOLOGIZING

Rewrite each.

"You avoid because deep down you're afraid you aren't good enough, and perfectionism protects your self-esteem."

Evidence only supports repeated overchecking and delayed submission.

Rewrite:

"You are overwhelmed because you have trouble setting boundaries."

Evidence only supports excessive active commitments.

Rewrite:

"You keep failing because you have low self-worth."

Evidence supports unrealistic commitment design and discouragement.

Rewrite:

PART 27 — INTERNAL FORMULATION VS. CLIENT LANGUAGE

Internal formulation:

Overcalibrated target + selective evaluation avoidance.

Write client-facing language:

Internal formulation:

Broad overload with perfectionism maintaining excessive task duration.

Client-facing language:

Internal formulation:

Goal value uncertain; discouragement also present.

Client-facing language:

PART 28 — FORMULATION SHOULD PRODUCE A DECISION

Working formulation:

Target too high + selective avoidance.

What two decisions should follow?

Working formulation:

Broad overload + one missing prerequisite.

What decisions follow?

Working formulation:

Perfectionistic revision backlog overwhelm.

What intervention priority follows?

Why is a formulation that produces no useful decision professionally weak?

PART 29 — WHEN TO HOLD THE FORMULATION LIGHTLY

Two plausible explanations remain.

Evidence does not distinguish them.

Should the Accountabili-Buddy choose one anyway?

What can the Accountabili-Buddy do instead?

What language reflects appropriate uncertainty?

PART 30 — WHEN TO BECOME MORE CONFIDENT

What increases confidence in a complex formulation?

What role do repeated behavioral patterns play?

What role do successful or ineffective interventions play?

What role does contradictory evidence play?

PART 31 — COMPLEX CASE REVIEW TEMPLATE

For a multi-factor case, complete:

What is happening?

What factors are supported?

Which factor appears primary now?

Which factors appear secondary?

What evidence contradicts the current formulation?

What remains unknown?

What should be addressed first?

Why?

What result would support the formulation?

What result would cause revision?

PART 32 — CASE: OVERLOAD + AVOIDANCE

Client Goal:

Grow consulting business while completing certification and maintaining fitness.

Client has:

business goal;

certification;

fitness;

Spanish;

home renovation;

volunteer role.

Almost all commitments are inconsistent.

Business outreach is never completed.

Initial working formulation:

What would you address first?

Why?

Intervention:

Spanish, renovation, and volunteer commitments are paused for six weeks.

Following three weeks:

Fitness improves.

Certification improves.

Business outreach remains zero.

How should the formulation change?

What is now primary for the remaining business problem?

What should happen next?

PART 33 — CASE: PERFECTIONISM + OVERLOAD

Client Goal:

Complete online course launch.

Client works 30 hours weekly on the project.

Repeatedly adds:

extra lessons;

bonus materials;

design refinements;

additional worksheets.

Client reports:

"There is too much to finish."

What factors are present?

Which factor may be generating the other?

What should be established?

Intervention:

Return to original launch requirements.

Client agrees not to add additional content before launch.

Following week:

Workload becomes manageable.

Client still delays publishing because:

"What if buyers think it isn't good enough?"

How should the formulation change?

What issue is now more visible?

PART 34 — CASE: CAPACITY + DISCOURAGEMENT

Client Goal:

Complete professional certification.

Old schedule:

Five study periods.

New permanent schedule:

Three periods.

Commitment remains five.

Recent exam failures have also damaged confidence.

What factors are present?

What should be addressed first?

Why?

After commitment is reduced to three, client completes all three but says:

"I still don't think I'll ever pass."

What factor remains?

What should the Accountabili-Buddy avoid doing?

PART 35 — CASE: MISSING PREREQUISITE + AVOIDANCE

Client Goal:

Launch website.

Client cannot complete payment setup because technical knowledge is missing.

Client also repeatedly postpones asking the developer for help.

What factors exist?

Which factor is the prerequisite issue?

Which behavior may need accountability?

Design the next commitment:

PART 36 — CASE: PRIORITIES + OVERCOMMITMENT

Client says:

business is top priority;

fitness is top priority;

certification is top priority;

family project is top priority.

Available time cannot support all four at requested levels.

What system-level issue exists?

What additional issue exists in the client's language?

What must happen before individual commitments can be calibrated?

PART 37 — CASE: DISCOURAGEMENT + GOAL VALUE

Client has not passed the certification exam after three attempts.

Client says:

"I don't know if I want this anymore."

Later:

"If I knew I could pass, I would absolutely still want it."

What factor strengthens?

What factor weakens?

Can discouragement still become severe enough that goal review remains appropriate?

Explain:

PART 38 — CASE: SUCCESSFUL BUT UNSUSTAINABLE + PERFECTIONISM

Client meets every weekly business commitment.

However:

works until 2 a.m.;

repeatedly redoes already acceptable work;

sacrifices exercise and sleep.

What does the completion data show?

What does it fail to establish?

What factors may be present?

What should the Accountabili-Buddy review?

PART 39 — CASE: DEPENDENCY + SUCCESS

Client completes all study sessions.

Three scheduled Accountabili-Buddy check-ins per week are active. Client frequently waits until a check-in before initiating and asks the Accountabili-Buddy to choose each session time.

Client says:

"I couldn't do this without you."

What positive pattern exists?

What process concern exists?

Why is “successful completion” an incomplete evaluation?

What should be tested?

PART 40 — CASE: MULTIPLE FACTORS, LIMITED EVIDENCE

Client has missed four weeks of commitments.

Client reports:

stress;

poor sleep;

busy schedule;

uncertainty;

low motivation;

family conflict.

No detailed behavioral history yet exists.

What should the Accountabili-Buddy avoid?

What is the correct formulation confidence?

What should happen next?

PART 41 — RAPID MULTI-FACTOR CLASSIFICATION

For each, identify:

Primary factor Secondary factor What remains unknown

Target exceeds available capacity.

Within available capacity, one high-stakes task is selectively avoided.

Primary:

Secondary:

Unknown:

Client has too many active goals.

Perfectionistic standards make each goal consume additional time.

Primary:

Secondary:

Unknown:

Client wants the goal but has become discouraged after repeated non-completion.

Commitment also remains unrealistically high.

Primary:

Secondary:

Unknown:

Client's goal value is uncertain and they are also heavily overloaded.

Primary:

Secondary:

Unknown:

PART 42 — RESPONSE-WRITING BRIDGE

Write what you would actually say.

Client:

"So am I overwhelmed or avoiding?"

Evidence supports both.

Response:

Client:

"You're telling me I have three different problems."

Response:

Client:

"Which one do we fix first?"

Response:

Client:

"What if we fix the wrong thing?"

Response:

Client:

"This feels complicated."

Response:

PART 43 — COMPLEX FORMULATION REVISION

Initial formulation:

Overwhelm + overcommitment.

Intervention:

Reduce active commitments.

Result:

Broad improvement except one task.

Revised formulation:**Initial formulation:**

Avoidance + perfectionism.

New evidence:

Objective quality requirements remain unmet.

Revised formulation:**Initial formulation:**

Loss of interest + discouragement.

New evidence:

Client clearly states they still want outcome if success is possible.

Revised formulation:**Initial formulation:**

Capacity limitation + poor scheduling.

New evidence:

Client completes comparable tasks consistently during same time.

Revised formulation:

PART 44 — WHEN A COMPLEX FORMULATION IS TOO COMPLEX

Accountabili-Buddy writes:

“Client has avoidance, overwhelm, perfectionism, fear of failure, fear of success, confidence problems, motivation problems, boundary issues, and poor executive functioning.”

What is wrong?

How should the Accountabili-Buddy simplify?

What test should every factor pass before being included?

PART 45 — COMPLEX CASE: JOB SEARCH

Client Goal:

Find new employment.

Commitment:

Four applications.

History:

Two routine applications consistently submitted.

High-stakes applications repeatedly postponed.

Actual schedule supports three applications, not four.

Client reports rejection anxiety.

Identify factors:

What is clearly supported?

What remains hypothesis?

What commitment should be calibrated?

What behavior should be directly addressed?

Write the client response:

PART 46 — COMPLEX CASE: FITNESS

Client Goal:

Exercise five times weekly.

Actual sustainable capacity:

Three sessions.

Client completes two.

The missed available session is a group class.

Client says they feel embarrassed about being out of shape.

Identify the factors:

What should happen to the baseline?

What should happen with the group-class issue?

Why would setting the target at two be potentially weak?

PART 47 — COMPLEX CASE: COURSE LAUNCH

Client Goal:

Launch course.

Original launch criteria are complete.

Client continually adds content.

Workload becomes excessive.

Client is now exhausted.

Publishing remains delayed.

Map the sequence:

What should be addressed first?

What should be watched after workload reduction?

If delay remains after scope is controlled, what becomes more important?

PART 48 — COMPLEX CASE: CERTIFICATION

Client Goal:

Pass exam.

Factors:

available study time reduced permanently;

target not recalibrated;

repeated exam failures;

confidence low;

client still values credential.

Primary intervention:

Secondary intervention:

What should NOT be concluded?

What evidence would justify goal review?

PART 49 — COMPLEX CASE: BUSINESS OWNER

Client Goal:

Grow business.

Active commitments include:

prospecting;

content creation;

accounting;

website;

networking;

course creation.

Total load exceeds capacity.

Client completes accounting and website consistently.

Prospecting remains zero.

Client says:

"I hate hearing no."

What is the system-level factor?

What is the task-level factor?

Which should be addressed first?

Why?

After load reduction, prospecting remains zero.

What should become primary?

PART 50 — FINAL INTEGRATED COMPLEX CASE

Client Goal:

Build a consulting practice while completing a certification.

Initial commitments:

Five prospect contacts weekly.

Five study sessions weekly.

Three workouts weekly.

Available capacity supports:

Three prospect contacts.

Three study sessions.

Three workouts.

Results for four weeks:

Prospecting: 1, 1, 2, 1 Study: 2, 2, 2, 2 Fitness: 3, 3, 3, 3

Client says:

"I'm overwhelmed and terrible at follow-through."

What system-level evidence exists?

What should not be accepted from the client's self-description?

What should be recalibrated?

What performance pattern deserves separate investigation?

Intervention:

Prospecting baseline reduced to three.

Study baseline reduced to three.

Fitness remains three.

Following three weeks:

Prospecting: 1, 1, 1 Study: 3, 3, 3 Fitness: 3, 3, 3

What did recalibration clarify?

What factor appears primary for prospecting now?

New information:

Client says:

"I know I have time for the three. I spend the prospecting time working on my website because I don't want to hear no."

What is now strongly supported?

What should happen next?

Client begins prospecting but spends extensive time perfecting each message.
Only one contact is completed.

What new secondary factor appears?

How should the formulation change?

Intervention:
Define a reasonable outreach-message standard. The client commits to stop revising once that standard is met.

Following week:
Three prospect contacts completed.

What did the intervention support?

What does it not prove permanently?

Several weeks later:
Prospecting is stable at three.
Study remains three.
Fitness remains three.

Client says:
"I guess this wasn't one giant problem."

Write the response:

Summarize the final working formulation:

Which problem was system-level?

Which problems were task-level?

How did intervention results improve the formulation?

What would have happened if the Accountabili-Buddy had accepted:

"I'm just terrible at follow-through"
as the formulation?

STAGE 5A SELF-REVIEW

- Can I recognize when one-factor reasoning is insufficient?
- Can I distinguish primary, secondary, and background factors?
- Can I recognize sequential mechanisms?
- Can I distinguish cause from consequence?
- Can I recognize when one factor masks another?
- Can I avoid listing every possible influence?
- Can I identify the smallest useful formulation?
- Can I prioritize interventions?
- Can I choose an intervention partly for the information it will produce?
- Can I revise the ranking of factors after new evidence?
- Can I use contradictory evidence?
- Can I distinguish system-level from task-level problems?
- Can I simultaneously recalibrate one part of a commitment and challenge another?
- Can I hold multiple explanations without becoming vague?
- Can I say "we don't know yet" when necessary?
- Can I communicate a complex formulation to the client in simple language?
- Can I avoid unnecessary psychological interpretation?
- Can I keep the accountability process focused on actionable factors?

STAGE 5A CORE STANDARD

A complex accountability case is not one in which the Accountabili-Buddy can identify the largest number of possible explanations.

It is one in which more than one factor materially affects follow-through and the Accountabili-Buddy must determine how those factors interact.

The Accountabili-Buddy should ask:

What factors are actually supported?

Which factor is affecting the largest part of the problem?

Which factor is preventing progress now?

Which factor should be addressed first?

What will that intervention teach us?

What remains unexplained afterward?

Complex formulation should reduce confusion.

It should not create it.

A strong Accountabili-Buddy may conclude:

“Two things are happening.”

or:

“The broad problem is overload, but there is a separate selective issue here.”

or:

“The commitment was genuinely too large, but reducing it does not explain why the remaining realistic action is still being avoided.”

or:

“Perfectionism appears to be generating part of the overwhelm rather than simply coexisting with it.”

The Accountabili-Buddy does not need to resolve every mechanism simultaneously.

The Accountabili-Buddy needs a formulation that is accurate enough to select the next useful intervention.

The governing standard is:

Identify only the factors the evidence supports. Determine how they interact. Prioritize the factor that matters most now. Intervene in a way that produces both progress and information. Revise the formulation when the evidence changes.

END OF STAGE 5 — WORKBOOK 5A: COMPLEX FORMULATIONS & MULTI-FACTOR CASES